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Page 1 of 18 **MAY 30 2006**

FAX

Urgent and Confidential

Date: May 30, 2006

TO: **USPTO**
Examiner B. Chervinsky
Art Unit 2835
Fax Number 571-273-8300

FROM: **Paul E. Steiner**
Fax Number 703-633-3303
Phone Number 703-633-6830

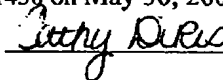
SUBJECT: Application Number 10/822,054
Inventor(s) Richard MONTGOMERY, et al.
Date Filed April 8, 2004
Docket Number P15278
Title Cold Plate

INCLUDED IN THIS TRANSMISSION:

Fax Cover Sheet	1 page
Fee Transmittal	1 page
Transmittal	1 page
Petition for Extension of Time	1 page
Appeal Brief	14 pages

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Commissioner for Patents, PO BOX 1450, Alexandria, VA 22313-1450 on May 30, 2006.

Cathy Dikes



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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/822,054	
	Filing Date	April 8, 2004	
	First Named Inventor	Richard MONTGOMERY	
	Art Unit	2835	
	Examiner Name	B. Chervinsky	
Total Number of Pages in This Submission	18	Attorney Docket Number	P15278

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax cover sheet
Remarks Replacement Drawing Sheet 1		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Intel Americas	
Signature	/Paul E. Steiner/	
Printed name	Paul E. Steiner	
Date	May 30, 2006	Reg. No. 41,326

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Signature	<i>Cathy Dikes</i>	
Typed or printed name	Cathy Dikes	Date May 30, 2006

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/822,054
TOTAL AMOUNT OF PAYMENT (\$) 620.00		Filing Date	April 8, 2004
		First Named Inventor	Richard MONTGOMERY
		Examiner Name	B. Chervinsky
		Art Unit	2835
		Attorney Docket No.	P15278

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

- Each claim over 20 (including Reissues)
- Each independent claim over 3 (including Reissues)
- Multiple dependent claims

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP = 0	x	50.00	= 0
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP = 0	x	200.00	= 0
HP = highest number of independent claims paid for, if greater than 3.			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Appeal Brief (\$500) Petition for Extension of Time (\$120)

Fees Paid (\$)

620.00

SUBMITTED BY

Signature	/Paul E. Steiner/	Registration No. (Attorney/Agent)	41,326	Telephone	703-633-6830
Name (Print/Type)	Paul E. Steiner			Date	May 30, 2006

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